Application #:

Parcel Combination Application

Name	Phone	
Address	Email	
City, State, Zip		
Property Numbers to be Combined		
Submit payment and make check payable to:	Kevin Harris 67482 Coyote Trail Edwardsburg, MI 49112	Fee: \$150
BY INITIALING HERE, I AM AKNOWLEDGING PARCELS LISTED ABOVE MAY BE SUBJECT TO CU ROAD FRONTAGE, ETC. REGARDLESS OF THE SIZI REQUEST BEING MADE.	RRENT ZONING WITH REGARD TO	O SIZE, SHAPE,
COMPLETED APPLICATIONS - INCLUDING PAYME PROCESSED FOR THE FOLLOW The fee must be included with the application (see refundable for void or denied applic	VING YEAR'S ASSESSMENT ROLL. • fee schedule below for amounts o	wed). Fee is non-
I hereby certify the information supplied with this applica	ation is true to the best of my knowled	ge.
Applicant Signature *ANY AND ALL OWNERS OR POA's MUST SIGN THIS FOR	Date RM IN FRONT OF A NOTARY.	
STATE OF MICHIGAN		
COUNTY OF		
The forgoing instrument was aknowledged before m on	this day of _	MONTH
YEAR		
My commission expires		

LOCAL GOVERNMENT USE ONLY (do not write below this line)

Approved: Conditions, if any

Denied: Reasons

Township Assessor

Date

Date

Township Supervisor/Zoning Administrator